

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: AURORA RES ALT CUMBERLAND 048 (510301)

Address: 1409 ARCADE STREET, CUMBERLAND, WI 54829

License Status: REGULAR

Licensed/Certified/Registered 01/01/1995

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0096586 **End Date:** 03/09/2006 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093631 **End Date:** 04/12/2004 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091652 **End Date:** 11/05/2003 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Complaint History

Date Complaint Received: 12/30/2003

Date Investigation Completed: 04/12/2004

Subject Area(s)

RESTRAINTS

Result

NOT SUBSTANTIATED

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